Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control n

## PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number 10025949

OR

OR

TOTAL

ADD'L FEE

	CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OTHER THA OR SMALL ENTI	
	FOR	NUM	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FI
BASIC FEE (37 CFR 1.16(a))							\$	OR		\$_
TOTAL CLAIMS (37 CFR 1.16(c))			minus 2	20 = .		x \$=		OR	x \$=	
INC	EPENDENT CLA CFR 1.16(b))	ims	minus 3 =			x \$ =		OR	x \$=	1
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ 5 =		OR	+ \$ =	<del> </del>
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	
	C	LAIMS AS AN	MENDE	) – PART II				_		
	(Column 1) (Column 2) (Column 3)					SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	12.8.04	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	AD TIOI FE
	Total (37 CFR 1.16(c))	. 14	Minus	20	=	× \$ =		OR	x \$=	
	Independent (37 CFR 1.16(b))	3	Minus	··· 3		x s =		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =		OR	+ \$ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADI TION FE
	Total (37 CFR 1 16(c))	•	Minus		=	x \$=		OR	x s =	
	Independent (37 CFR 1 16(b))	•	Minus		=	× \$ =		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	+ \$=	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
ENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADI TION FE
	Total (37 CFR 1 16(c))	•	Minus	••	=	x \$=		OR .	x \$_ · =	
EN	Independent (37 CFR + 16(b))	•	Minus .	• • •	:	x \$ =		OB	x s =	

• If the entry in column 1 is less than the entry in column 2, write "0" in column 3

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))

- "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"
  - The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

TOTAL

ADD'L FEE